

Declaration, Power Of Attorney and Petition

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WE (I) the undersigned inventor(s), hereby declare(s) that:

My residence, post office address and citizenship are as stated below next to my name,

We (I) believe that we are (I am) the original, first, and joint (sole) inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled

"IMAGE FORMING APPARATUS, IMAGE TRANSFERRING DEVICE AND
RECORDING MEDIUM CONVEYING METHOD"

the specification of which

☐ is attached hereto.

☒ was filed on October 27, 2000 as

Application Serial No. 09/696,959

and amended on _____.

☐ was filed as PCT international application

Number _____

on _____,

and was amended under PCT Article 19

on _____ (if applicable).

We (I) hereby state that we (I) have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

We (I) acknowledge the duty to disclose information known to be material to the patentability of this application as defined in Section 1.56 of Title 37 Code of Federal Regulations.

We (I) hereby claim foreign priority benefits under 35 U.S.C. § 119(a)-(d) or § 365(b) of any foreign application(s) for patent or inventor's certificate, or § 365(a) of any PCT International application which designated at least one country other than the United States, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or PCT International application having a filing date before that of the application on which priority is claimed. Prior Foreign Application(s)

Application No.	Country	Day/Month/Year	Priority Claimed
11-308404 (JP)	Japan	October 29, 1999	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2000-113703 (JP)	Japan	April 14, 2000	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2000-249856 (JP)	Japan	August 21, 2000	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No

Toshiaki MOTOHASHI
NAME OF SECOND JOINT INVENTOR

Toshiaki Motohashi
Signature of Inventor

November 20 , 2000
Date

NAME OF THIRD JOINT INVENTOR

Signature of Inventor

Date

NAME OF FOURTH JOINT INVENTOR

Signature of Inventor

Date

NAME OF FIFTH JOINT INVENTOR

Signature of Inventor

Date

Residence: Saitama, Japan

Citizen of: Japan

Post Office Address: 1330-4-205,
Sezaki-cho, Soka-shi,
Saitama, Japan

Residence: _____

Citizen of: _____

Post Office Address: _____

Residence: _____

Citizen of: _____

Post Office Address: _____

Residence: _____

Citizen of: _____

Post Office Address: _____